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JTB

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : MELESKY
Appl. No. : 10/024,478
Filed : December 21, 2001
Title : INSULATION COVER FOR ATTIC CLOSURES

Grp./A.U. : 3637
Examiner : TRAN A, PHI DIEU N

Docket No.: 13811

Honorable Commissioner of Patents
Alexandria, VA 22313-1450

August 28, 2003

RESPONSE TO INITIAL OFFICE ACTION

Sir:

In response to the Initial Office Action of May 29, 2003,
the following amendments are presented with this response.

Amendments to the Specification begin on page 2 of this response.

Amendments to the Abstract of Disclosure begin on page 4 of this
response.

Amendment to the claims begins on page 6 of this response.

Amendment to the Drawings begin on page 13 of this response.

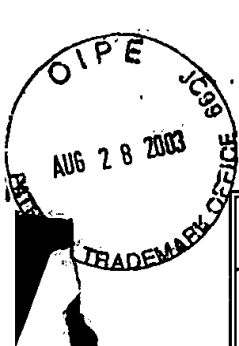
Remarks/Arguments being on page 14 of this paper.

08/29/2003 CNGUYEN 00000056 10024478

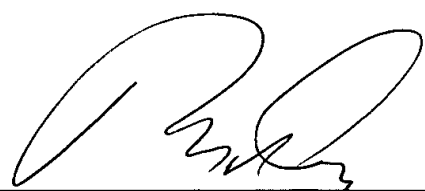
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AMENDMENT TRANSMITTAL LETTER				ATTORNEY'S DOCKET NO. 13811		
SERIAL NO. 10/024,478	FILING DATE 12-21-2001		EXAMINER Tran A, Phi Diue N		GROUP ART UNIT 3637	
INVENTION INSULATION COVER FOR ATTIC CLOSURES						
TO THE COMMISSIONER OF PATENTS AND TRADEMARKS: Transmitted herewith is an amendment in the above-identified application. The fee has been calculated as shown below.						
CLAIMS AS AMENDED						
(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) No. of extra claims present	(6) Rate	(7) Additional fee
Total claims	22	Minus	** 20 =	2	x 9.00	=18.00
Indep. claims	*	Minus	** =		x	=
Total additional fee for this amendment						
*If the entry in column 2 is less than the entry in column 4, write "0" in column 5 **If the "Highest Previously Paid For" IN THIS SPACE is less than 10, write "10" in this space						
<p><input type="checkbox"/> No additional fee is required.</p> <p><input checked="" type="checkbox"/> A check in amount of \$18.00 is attached.</p> <p><input type="checkbox"/> Charge \$_____ to Deposit Account 04-1577. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> Please charge any additional fees or credit overpayment to Deposit Account 04-1577. A duplicate copy of this sheet is enclosed.</p>						
August 28, 2003 Date		 Ralph A. Dowell 26,868 Attorney of Record PTO CUSTOMER NO.: 000293				

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